

## BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE		
						09/88 9242	APPLICANT(S)		
CLAIMS									
-	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1							51		
2							52		
3							53		
4							54		
5							55		
6							56		
7							57		
8							58		
9							59		
10							60		
11							61		
12							62		
13							63		
14							64		
15							65		
16							66		
17							67		
18							68		
19							69		
20							70		
21							71		
22							72		
23							73		
24							74		
25							75		
26							76		
27							77		
28							78		
29							79		
30							80		
31							81		
32							82		
33							83		
34							84		
35							85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	2								
TOTAL DEP.	43								
TOTAL CLAIMS	45								

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)						SERIAL NO. 09/189242	FILING DATE 7-13-01					
						APPLICANT(S)						
CLAIMS												
1	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1							51					
2		1			1		52					
3		1			1		53					
4		3					54					
5		3					55					
6		3					56					
7		3			1		57					
8		3			1		58					
9		1			1		59					
10		3			1		60					
11		3			1		61					
12		0			1		62					
13		0			1		63					
14		0					64					
15		0					65					
16		0					66					
17		0					67					
18		0					68					
19		3					69					
20		0			1		70					
21		0					71					
22		1			1		72					
23		1			1		73					
24		1			1		74					
25		1			1		75					
26		1			1		76					
27		1			1		77					
28		1					78					
29		1					79					
30		1					80					
31		1					81					
32		1					82					
33		1					83					
34		1					84					
35		1			1		85					
36		1					86					
37		1					87					
38		1					88					
39		1					89					
40		1					90					
41		1					91					
42		1					92					
43		1					93					
44		1					94					
45		1					95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	2		2				TOTAL IND.					
TOTAL DEP.	59	↓	43	↓			TOTAL DEP.					
TOTAL CLAIMS	61		45				TOTAL CLAIMS					